

## **This week DHS would like to share the following information**

- **Reminder: 834 Transaction Work session on December 17th**
- **Companion Guide Updates**

### **1. Reminder: 834 Transaction Work session on December 17th**

We have received some good feedback from the PHP's regarding the Crosswalk comparing the Current OMAP Enrollment file to the 834 Enrollment File. DHS is currently in the process of reviewing these comments in preparation for the December 17<sup>th</sup> 834 Transaction Work Session. The meeting will be held at DHS at 8:30 in room 352.

DHS will be documenting the decisions made at this meeting and include a summary in the December 19<sup>th</sup> weekly email message. If you have questions related to your preparation for the work session, who should attend from your organization or about the crosswalk, please contact: Nancy L. Buck, HIPAA Coordinator at (503) 945-6797

### **2. Companion Guide Updates**

As we increase our business-to-business testing activities there will likely be many changes to the DHS companion guides. While these changes seem to be frustrating at times, it does demonstrate that we are collectively make progress in our compliance efforts.

In an attempt to help DHS trading partners stay current regarding the most recent changes we will periodically use the weekly email message to communicate revisions. Here is a brief summary of the most recent revisions to the 837 Professional and Institutional Fee For Service Companion Guides:

- Removed delimiter constraints from ISA16, adding cautionary note to front page.
- Clarified ISA06 and GS02 element comments to reflect that the trading partner number should be used in these elements.
- Changed NM109 element requirements, reducing the number of options allowable to 'PROVIDER' and 'DSHDXPHL'..
- Changed SBR09 element to allow only 'MC'.
- Reduced Loop 2430 CAS segment to 5 repeats.
- Remove note/comment for CAS02 effectively removing CAS segment at Loop 2320.
- Changed CLM05-3 element comment to reflect that data values of '7' or '8' are not for Medicare crossover claims from the intermediary. They are for claim adjustment from the providers. Medicare must use a '1' in this element.
- Made HI segment in Loop 2300 required.

- Loop 2010AA/REF - Billing Provider Secondary Identification made required
- Removed OR-DHS requirement for the QTY01 element (Inst. only).
- Made other minor corrections and clarifications in several areas too numerous to mention.

Again, expect to see more changes to the companion guides as we progress through business-to-business testing. The next companion guide revision summary in the weekly email message will include both the 837 Professional and Institutional Fee For Service and Encounter.

For the most recent published companion guides refer to the “resources” area of the Oregon DHS Edifecs Website. If you have questions contact the DHS EDI Testing Team at 503-947-5347 or email your questions to:  
[DHS.HIPAA TESTING@state.or.us](mailto:DHS.HIPAA TESTING@state.or.us).